No.4

Phone: (208) 334-2852 Fax: (208) 334-2282

	Item	Expenditures made by the lobbyist or by the lobbyist's personal property to any Legislator, or for or on behalf of				imployer in the nature of contributions of money or other tangible or intangible fany legislator.					
		Date		Amount			Name of Legislator Receiving or Benefited				
	(NONE)		E)	(NONE)		(A	ο <i>ΝЕ</i> ,)			
47	Subject Code (from table)		ouse Bill, obbyist w Bill, Re Legislat George Theolic Olsone M-clic HM. SB- SJM	matter of proposed legislation, the number of the Sene Bill, Resolution or other législative activity in who by it was supporting or opposing. Bill, Resolution or Other Appropriation Bill Num and Section Number and Section Number and Section Number because the Budget of Budg			Code	LEGISLATIVE SU e Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizons Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, rederal Government, municipal Government, special districts Government, state	20 21 22 23 24 25 26 27 28 29 30	Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, pennits Liquor Menufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmon's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)	
								Employer No. 1 signature (NONE) Employer No. 2 signature		Date Of 03 / 2008 Date N/A Date	
. (CERTIFI	CATIC	ON: I here	sby certify that the dance with Section	above is a true 67-6624 Idah	, complete and		Employer No. 3 signature (NONE) Employer No. 4 signature		Date NA Date	